

# **EXHIBIT I**

LEWIS, JIMMI

12/12

## ESS NOTES (Continued)

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Patient's Name MELBA JEAN LEWIS, BOTH AREA 5

Hospital No.

05/21/2004

OBSERVATION, ACTION, OR POSSIBLE SOLUTION

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DATE T

5/24/04 11:30 am continued: - at 11:00 am while monitoring pt closely and document any changes.

6/24/04 1:50 pm OD No to - point  
pt was placed on 4 restraints.  
Because of disruptive, aggressive, threatening, overruling staff.

pt. was placed on 4 point room train for his safety and other's safety.

Mental status: pt. said he is upset.

He denied any injury.

He said sometimes loss of ATT. He did not understand why he did that.

pt. seems to be angry. Alert.

Plan: pt. will receive Benadryl 50 mg now to keep pt sedated / drowsy to decrease possibility to hurt himself or others.

He already got PRN meds NR having 200 Garden 200 + Ativan 2mg + Benadryl 50mg.

He will have 2 more m. Accutane, R.O.

or. restraints - ~~Quarantine~~

6/24/04 1:50 PM Pt. Accutane, now lying in Seclusion room to 4 point restraints. It is Seclusion room due to continued agitation @ 3:00 PM. Pt. refusing to answer questions & taking no answer to his aggressive behavior. Pt. given additional PRN of Benadryl 50mg in a consist of Seclusion order. Pt. was not to start treatment for safety of other & the restraints were changed to three & two to increase compliance.

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DEPARTMENT OF HEALTH AND SOCIAL SERVICES  
DIVISION OF SUBSTANCE ABUSE AND MENTAL HEALTH  
DELAWARE PSYCHIATRIC CENTER

LEWIS TIMMY

12/25

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NEWARK NJ 07112

JEAN LEWIS MOTH AREA 5

05/21/2004

## PROGRESS NOTES

(Continued from only -- not to be duplicate)

OBSERVATION, ACTION, OR POSSIBLE SOLUTION

DATE	TIME	OBSERVATION, ACTION, OR POSSIBLE SOLUTION
6/23/04	1535	Pt wrote a grievance against a female NA, stating that p snobs - she passed by making demeaning comments re: his sexual preferences, etc. At time this occurred, RN was passing meds from med cart just inside door of unit. NA entered unit and walked past the pts who were lined up awaiting their meds - walked to NA desk & comment to anyone and went to desk. Hester RN
6/23/04	6:15 PM	Pt was re-directed from peering into another patient's door window and became verbally abusive towards staff asking "if they were trying to create a scene and if they wanted him to start focusing on him." Lance & Angela N.A.
6/24/04	1:20 P	Pt was in the dining room @ his table during lunch MR Lewis threw his lunch tray against the wall and was ask by staff to pick up his tray, there was no response MR Lewis then reached over and grabbed another pt's tray and threw it against the wall and stated "I want my fucking mail". The attempted to re-direct MR Lewis to clean up his trays and he refuse redirection. James Russell
6/24/04	1:48 PM	Pt's level of agitation escalating rapidly. Verbal intervention ineffective in redirect his behavior. Per Ativan 2mg IM, Serenol 50mg IM, Unasyn 20mg IM given to help pt regain control of his behavior. Pt continues to be agitated. OD called & 40 restraints order placed & placed pt 40 restraints in gown.

PROGRESS NOTES

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WELBA, JEAN LEWIS MOTH AREA 5

05/21/2004

## PROGRESS NOTES

(Continued)

DATE	TIME	OBSERVATION, ACTION, OR POSSIBLE SOLUTION
6/22/04	2430	Pt became Tanquy p assessment of OD to continue seclusion because he would not contract for safety. Pt kicking & banging door - OD determined that he would require 4 pt restraints. Supervisor called to request assistance due to explosive behavior. Pt placed in 4 pt restraints @ 11:05 PM & given PRN (IM). ——— Dalei Harklow
6/22/04	1 <sup>15</sup> AM	Pt remains in 4 restraints due to agitation. O.D. called & renewed order for 4 restraints not to exceed 2 hrs. will monitor pt closely. ——— m. jordan
6/22/04	2 <sup>30</sup> AM	Pt. is calm & quiet & arm & left leg restraint removed. ——— m. jordan
6/22/04	3 <sup>00</sup> AM	<del>pt. calm</del> <sup>error</sup> no restraints D.L'd at this time. Pt. contracted for safety & returned to bedroom. will monitor pt. closely. ——— m. jordan
6/22/04	6 <sup>30</sup> AM	no restraints will 5 further behavioral problems. will monitor pt. closely. ——— m. jordan
6/22/04	6 <sup>10</sup> AM	Pt AEOX, maintained as routine observation during any A/V interruptions at 8:00 AM. At approx 4:30 PM Rose Pres reported to nurse that it was coming to a "bitel" as he worked. By 5:00 PM with H. Harklow, L. Sager there with pt. he reported that he did not say anything directed toward Mr. Pres. Pt did not react during. Nurse informed Pt that he should not be cursing at Mr. Pres. Pt agrees to stop. Therapist intervention effective @ 5:15 PM. (Brennan)

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PROGRESS NOTES  
(Continued)

MELBA JEAN LEWIS MOTH AREA 5  
973-481-5028 05/21/2004

DATE	TIME	OBSERVATION, ACTION, OR POSSIBLE SOLUTION
6/21/04	1350	<p>MEDICAL NOTES:</p> <p>Pt says he was restrained about 2 weeks ago &amp; the said guard accidentally jammed on his neck area &amp; since then he had been feeling "difficultly swallowing" - no SOB, @ vomiting, @ heartburn, @ chest pains, @ cough. Pt says he eats all types of food.</p> <p>ambulatory, @ vision 128/80 - 96.6° - 90-12</p> <p>neck swelling, &amp; neck tenderness.</p> <p>@ neck deformity, @ tracheal shift</p> <p>@ pharyngeal mass, @ pharyngeal erythema</p> <p>front exam: (+) erythematous rash &amp; fissures under soc. (R) front</p> <p>A 1. No evidence of tracheal injury; @ pharyngeal obstruction</p> <p>2. laceration</p> <p>P = Lotrimin cream</p>
6/21/04	8:30 pm	<p>Pt. stated earlier because he lost his privileges, he was going to punch somebody out. Pt. also stated "Steff can suck my dick." - Susana Haver NA</p>
6/21/04	2110	<p>Pt had stretch peer - (R) jaw - also (L) rib area which has small abrasions. Pt requested to walk to quiet room which he did - pacing rapidly around rm - PRN of quoniam 10mg - benadryl 50mg - ativan 1mg PO given @ 2030. Agitation apparent so seclusion was initiated - pt. emptied pockets of papers &amp; money - counted &amp; marked \$8.25 sealed &amp; locked in med rm. shoes &amp; moved, clean shirt given &amp; door unlocked. (Haver)</p>



LEWIS, JIMMI

12/25

## PRESS NOTES (Continued)

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Patient's Name MELBA JEAN LEWIS MOUTH AREA 5

Hospital No.

05/21/2004

DATE TIME OBSERVATION, ACTION, OR POSSIBLE SOLUTION

6/21/04 9:00pm

OD Note

Mr. Lewis reportedly hit another on the <sup>(L)</sup>Left and then <sup>(R)</sup>Right side of jaw. err.

6/21/04 9:20pm

OD Note

Mr. Lewis hit another pt on lower jaw on both sides. He needed PRN Meds and was secluded for extreme agitation. On interview pt was calm, explained his behavior as a response to another pt stealing his cigarette tape. He refused to apologize and stated he had no regret to his the chief. Pt can be released from seclusion when calm and no danger to others.

Sua Forke BERKMAN

6/21/04 11:00

Psych OD Note

Pt became agitated when evaluated for confirmation of seclusion started forcefully banging the door and cursing. Pt was rapidly escalating becoming increasingly dangerous to self and others. Pt was given Geodon 20mg IM & Ativan 2mg IM and restrained in 4 point restraints. After <sup>NO</sup> a. Sua Forke BERKMAN

6/21/04 11:15pm

Pt was in 4 Pt Restraints. Pt Broke Restraints to (L) Hand. While attempting to remove (R) hand Pt struck window in the Mouths of Pt Restraints Re applied. — Sua Forke

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AGGRESSIVE NOTES (Cont 3d)

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Patient's Name

MELBA JEAN LEWIS HOTH AREA 5

05/21/2004

Hospital No.

DATE	TIME	OBSERVATION, ACTION, OR POSSIBLE SOLUTION
5/14/04	2310	PT approached @ 2300 to determine if he was able to contract for safety to D/C seclusion - PT awake and refusing to speak to staff. OD called to reduce seclusion. - H. Wilson
5/15/04	2330	PT was able to contract for safety @ 2305 & was taken out of seclusion, exit interview completed, will continue to monitor pt's behavior - Kenya Wilson
6/15/04	0705	PT rested quietly in bed, & aggressive behavior towards staff or other pts - Kenya Wilson
6/15/04	7:15am	OD Note (late entry) Patient was released from seclusion at 11:15 pm last night after he contracted for safety. Squat - Directing, mp
6/15/04	4:30pm	Conclusion PT seen to discuss the aggressive, violent behavior he has been displaying over the last several days; he has been oppositional, aggressive & defiant since admission. PT stated he was mistreated by staff and he basically <del>had</del> <sup>even</sup> took no responsibility for any of it. He was told that the RO had a report to investigate the situation of some money that disappeared that was later found. He had been told to come in of the park & he refused to do it. PT was angry because he said he had been told that his privilege restriction had been prolonged without his knowledge. PT went on on, argument, oppositional. PT took no responsibility for his actions & refused denied all the issues involved. Plan - Restrictions to continue for 1 week from 1st day of stay Squat

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PROGRESS NOTES  
(Continued)

LEWIS, JIMMY

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12/21  
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MOTH AREA 5  
05/21/2004

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DATE	TIME	OBSERVATION, ACTION, OR POSSIBLE SOLUTION
6/14/04	6:15 PM	Plaster will 5 further behavioral problems. Will monitor pt closely. ———
6/14/04	9:25 PM	Pt non-compliance to staff, threatening staff aggressive, very abusive verbally, agitated, threw a elbow @ staff ——— R. Gray
6/14/04	2:25	
6/14/04	9:30 PM	NO Note. Patient had been agitated and aggressive since evening. He was cursing, yelling and threatening staff members. He was tried earlier to verbally calm him down - He was actually angry this evening because he is not allowed to eat anything from vending machine. His privileges were taken away slowly because he doesn't follow direction and any routine unit activities. Therefore, when he was told that patient could not have a candy bar, he lost control and started to fight physically with staff members who also threatened to "get the staff". He was separated, given prn medication of Geodon 20mg po, 2mg of Ativan and 50 mg of Benadryl. He had to be secluded because he continued to hit and kick the walls & staff. Seclusion was started at 9:00 pm not to exceed for more than 2 hrs. He may be released earlier if he calms down. S. H. ——— DUREN, MD
6/14/04	2:30	Pt remains in seclusion - upon approach @ 2:30 pt awake, lying on side facing away from the door - door opened and inquired how he was feeling - glanced over his shoulder & refused to speak to staff. Seclusion continues. H. H. ——— Dr. J. ——— contacted & aware of above. ——— H. H. ———



LEWIS, JIMMY PROGRESS,

(Continued)

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Hospital No.

MOTH AREA 5

OBSERVATION, ACTION, OR POSSIBLE SOLUTION

DATE TIME CONT.

4/13/04 1<sup>st</sup> pt tests and staff. This was reported to D. Lawrence, RN and pt was given a PRN. J. Goss

6/13/04 2<sup>nd</sup> pm Patient became disruptive on the unit due to his cussers over being asked to leave the ballroom and clear hall in order for 2:1 patient to have access. Pt began cursing & refused to follow unit routine. Patient was asked if he needed a pin to help him calm down, pt replied yes! Pin 100mg was given. Pt cont. to refuse to go to the dayhall. When pt went & pt remained on the unit & a staff present. Lawrence RN

6/14/04 12<sup>30</sup> am During the changing of shift Pt. (Jimmy Lewis) was told to close the laundry room door. Pt then began to threaten the staff and getting aggressive. Pt was told to calm down and relax. ~~was or still there~~ Close E.D. at

6/14/04 1<sup>st</sup> am Pt. became extremely agitated for no apparent reasons. Pt level of agitation escalating rapidly. Verbal interventions ineffective in redirecting his behavior. Pt. resistant to ~~error~~ and not willing to take oral meds. Nursing supervisor called for extra help due to pt's unpredictable ~~behavior~~ <sup>and</sup> behavior. Pt. continues to be agitated and <sup>not</sup> willing to take PRN meds ~~in even~~ after much encouragement. Pt. had to be physically escorted to a.e. & 1st med given. Pt. remained in a.e. for 5 mins and returned to his bed room. Pt. resting quietly at present time. Will monitor ~~pt~~ <sup>in</sup> closely. ~~on~~ <sup>in</sup> pt's

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PROGRESS NOTES  
(Continued)

LEWIS JIMMY

12/25

K H A, J  
NJ 07112HELENA JEAN LEWIS BOTH AREA 5  
05/21/2004

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DATE	TIME	OBSERVATION, ACTION, OR POSSIBLE SOLUTION
6/6/04	Ny 8P	When directed to QK. A removal of Eric from of Hall 105 & Barclay 100. (and be referred to psychiatric - staff + DD @ first. Then he finally spoke calmly with some reasoning. At removal restraints from 6:15 - 7P. DD, PDS, PM, UN all notified will continue to monitor CJG
6/7/04	6:15 pm	<p>Pneumatology</p> <p>Met with pt and RN mgr regarding pt's grossly inappropriate behaviors. (He dated 6/5 by the RN relates that pt intimidated her + told her what she had said about him in tx team was "wrong + derogatory." Despite her rebuttal, he continued to state that she had said false things about him.</p> <p>Last night, pt assaulted a peer and a staff member, escalated to the point where he required PMU med, + because he didn't respond to that, he escalated further, he required 4-pt restraint for the protection of self/others.</p> <p>Today, pt attempted to explain what happened to cause him to be that upset - it was mostly around the fact he didn't get a salad when he wanted it. When he saw the same peer later in the unit, he said the peer started to come at him, so he pulled pushed him on the head to push him back <del>on the chair</del> (in my). P. (over)</p>



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RESS NOTES (Cont)

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Patient's Name

MEIBA JEAN LEWIS MOTH AREA 5

05/21/2004

Hospital No.

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DATE	TIME	OBSERVATION, ACTION, OR POSSIBLE SOLUTION
6/6/04	6:30 PM	<p>OO note -</p> <p>Patient was agitated and hit another patient on the head and when he was separated he also hit the staff on the face, on exclusion. He stated that he did not get his sandals and he was upset about that. He was given Haldol 5 mg and Benadryl 25 mg and when he continued to be agitated he was put in 4 point restraint for safety of self and others. He had intense eye contact, speech loud. He appeared alert. He denied AVM. He denied SR or violent ideations. He will be taped at restraints when he calms down. <del>Staff</del> SANDHU, MD</p> <p>Attending</p> <p>His Pat, Pool play, visit and snack 9:00 will be restricted as advised by Dr Porter until evaluated by treatment team.</p>
6/6/04	Nr 8P	<p><del>Staff</del> SANDHU MD</p> <p>A nurse agitated over a salad in the DR. He began throwing his feces at (his few) responders (verbally). The staff remained calm after Mr Lewis refused to be restrained. He then began returning to unit struck feces in (a) side of face (unprovoked) and started spitting on staff. He also threatened staff with a knife. He was placed in restraints &amp; refused to continue and threatened staff &amp; spitting on staff.</p>

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